PART B - FEE(S) TRANSMITTAL

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Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

SUGHRUE MION, PLLC 2100 PENNSYLVANIA AVENUE, NW SUITE 800 WASHINGTON, DC 20037

Modified PTOL-85 (Rev. 08/07) Approved for use through 08/31/2010.

CUSTOMER NUMBER

05/06/2008 RNEBRAH1 00000120 194880 10566572

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APPLICATION NO.		ING DATE FIR		IRST NA	RST NAMED INVENTOR			ATTORNEY DOCKET NO.			CONFIRMATION NO.	
10/566,572 01/31/2006			Minoru TAGUCHI			Q92163			3675			
TITLE OF INVENTION: 4,5-DIHYDRONAPHTHO[1,2-B]THIOPHENE DERIVATIVE												
APPLN, TYPE	SMALL ENTITY			PUBLICAT		ION	PREV. PAID ISSUE FEE		TOTAL FEE(S) DUE		DATE DUE	
nonprovisional	NO	\$1440.00		\$300.00			\$0.00		\$1,740.00		06/04/2008	
4		A	ART UNI	Т	CLAS	S-SUBCLASS						
Bernard I Dentz				-	1625							
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363 2. For printing on the patent front page list 1 Sughrue Mion											ughrue Mion, PLLC	
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.								of up to 3 regi		2		
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) ATTACHED. Use of a Customer Number is required.								of a single firm		3		
03-02 of more recent) ATTACHED. Ose of a Customer Number is required.						member a registered attorney or agent) and the names of up to 2 registered patent attorneys or						
agents. If no name is listed, no name will be printed.												
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)												
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.												
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)												
TAISHO PHARMACEUTICAL CO., LTD. Tokyo, Japan												
Please check the appropriate assignee category or categories (will not be printed on the patent): 🗆 Individual 🗹 Corporation or other private group entity 🗀 Government												
4a. The following fee(s) are submitted:						4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)						
☑ Issue Fee					☐ A check is enclosed.							
☑ Publication Fee (No small entity discount permitted)					☐ Payment by credit card. Form 1310-2038 is attached.							
						☑ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 19-4880 (enclose an extra copy of this form).						
						SPTO is directed and authorized to charge all required fees to Deposit Account No. Please also credit any overpayments to said Deposit Account.						
5. Change in Entity Sta	tus (from status in	dicated above)										
□ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. □ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).												
The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.												
NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.												
Authorized Signature	authorized Signature Susan Man			Mass	Date				May 5	May 5, 2008		
Typed or Printed Name	Typed or Printed Name Susan J. Mack				Registration No.				30,951	30,951		